LOBBYING EXPENDITURE EX COVERING JANUARY 1 THROUGH	GH JUNE 30		Lob		istration N	umber
COVERING JULY 1 THROUGH II DUE FEBRUARY 15	DECEMBER 31		1		PICE USE Date: 45 yr	
Instructions				ER		
 Print in ink of type. Fill in Registration Number in spaces provided. Complete form and return to the Board of Fithes. Buton Rouge, LA 70808 (225) 763-8777 or (80 This form must be delivered or postmarked by This form may be faxed to (225) 763-8787. 	(0) 842-6630.	Picor,		1.	02 <i>30</i> 6.	J
1. Name Cornai er liasi Vii	Maxine si		мі		<u> 19</u>	
2. Business Address P. O. Box 46.	25	Bate Cit	on Roug	o Li	701 Zip	321
Mailing Address(sauc)	- S		50		(8 - 55)	
3. Business Phone 225-761-5007						
Area Code and T	eleptione Number				1.7	1880
Total of all expenditures made January (Include expenditures from Schedules A and B)	1 through June 3	0; \$	-0-			į.
 Fotal of all expenditures made July 1 to (When Applicable) (Include expenditures to 		31: \$ _.	-(1-		<u>:</u>	
6. Total of all expenditures made during of (Line 4 added with Line 5 should equal Line 6)	alendar year:	\$	0			2%
7. Did you make an expenditure exceeding	g \$50 on one occ	asion for a	any one le	egislator:		
From January 1 through June 30? From July 1 through December 31?	Yes Yes	X No		□ NA		
If the answer to either question in Num	ber 7 above is Yl	S, please	complete	Schedule /	A and attach	

Furm 602, Pay. 10:02

LOBBYING EXPENDITURE REPORT

309 Labbyist's Registration Number

	From January 1 through June 30?	Yes	E	No			01-1
	From July 1 through December 33?	☐ Yes	84	No		NA	
	If the answer to either question in Nu	mber 8 above is	YES, ph	case con	plete S	chodute /	and allach,
).	Did you expend funds for a reception legislature, either house, any standing created by resolution of either house, delegation thereof were invited during	, committee, sel subcommittee (lect comm of any coa	nittee, st	alutory -	committe	e, committee
	☐ Yes		K3	No			
		ES, please con	opiete SC	nearne 1:	and att	acn.	
						aca.	E S
		ETIEICATION				aca.	n a
		TIEICATION (OF ACC	DEACY.			20.
	CER	CIFICATION Contained herein	Ol: ACC	DRACY and corre	ect to Lhe	e best of	ny knowledge
	CER 1 hereby certify that the information of	CTECATION Contained herein portable expens	Ol: ACC) n is true a ditures ba	DRACY and corre	ect to the	e best of l	my knowledge n; and that no

Form 509, Rev. 10402